

Open Channel
Inspection and Maintenance Checklist
for Long Term Maintenance of Post-Construction BMPs

Facility Name: _____

Location: _____

Inspector(s): _____

Date and Time of Inspection: _____

Party Responsible for Maintenance:

Contact:

Phone Number:

E-mail:

0 = Good condition. Well maintained, no action required.
 1 = Moderate condition. Adequately maintained, routine maintenance needed.
 2 = Degraded condition. Poorly maintained, routine maintenance and repair needed.
 3 = Serious condition. Immediate need for repair or replacement.

<i>Key Questions</i>		
Item	X	Comments
1. Type of open channel system		
a. Dry swale	<input type="checkbox"/>	
b. Wet swale	<input type="checkbox"/>	
c. Other	<input type="checkbox"/>	Type of system:
2. Type of pretreatment facility		
a. Sediment forebay	<input type="checkbox"/>	
b. Check dam	<input type="checkbox"/>	
c. Grass filter strip	<input type="checkbox"/>	
d. Stone diaphragm	<input type="checkbox"/>	
e. Other	<input type="checkbox"/>	Type of pretreatment facility:
f. None	<input type="checkbox"/>	

<i>A. Contributing Drainage Area</i>							
<input type="checkbox"/>	Inspected						
<input type="checkbox"/>	Not Inspected						
	Item					Comments	
1.	Excessive trash/debris	0	1	2	3	N/A	
2.	Bare/exposed soil	0	1	2	3	N/A	
3.	Evidence of erosion	0	1	2	3	N/A	
4.	Excessive landscape waste/yard clippings	0	1	2	3	N/A	

<i>B. Pretreatment</i>							
<input type="checkbox"/>	Inspected						
<input type="checkbox"/>	Not Inspected						
	Item					Comments	
1.	Maintenance access to pretreatment facility	0	1	2	3	N/A	
2.	Excessive trash/debris/sediment	0	1	2	3	N/A	
3.	Evidence of clogging	0	1	2	3	N/A	
4.	Dead vegetation/exposed soil	0	1	2	3	N/A	
5.	Evidence of erosion	0	1	2	3	N/A	

Open Channel
Inspection and Maintenance Checklist
for Long Term Maintenance of Post-Construction BMPs

C. Inlets						
<input type="checkbox"/>	Inspected					
<input type="checkbox"/>	Not Inspected					
	Item					Comments
1.	Inlets provide stable conveyance into system	0	1	2	3	N/A
2.	Excessive trash/debris/sediment accumulation at inlet	0	1	2	3	N/A
3.	Evidence of erosion at/around inlet	0	1	2	3	N/A

D. Facility						
<input type="checkbox"/>	Inspected					
<input type="checkbox"/>	Not Inspected					
	Item					Comments
1.	Maintenance access to facility	0	1	2	3	N/A
2.	Sediment accumulation	0	1	2	3	N/A
3.	Evidence of erosion	0	1	2	3	N/A
4.	Evidence of oil/chemical accumulation	0	1	2	3	N/A
5.	Evidence of standing water:	<input type="checkbox"/>				
	a. Ponding	<input type="checkbox"/>				
	b. Noticeable odors	<input type="checkbox"/>				
	c. Water stains	<input type="checkbox"/>				
	d. Presence of algae or floating aquatic vegetation	<input type="checkbox"/>				
6.	Underdrain system (if equipped)	0	1	2	3	N/A
	a. Broken	<input type="checkbox"/>				
	b. Clogged	<input type="checkbox"/>				
7.	Condition of check dams	0	1	2	3	N/A
8.	Vegetation	0	1	2	3	N/A
	a. Plant composition consistent with approved plans	0	1	2	3	N/A
	b. Presence of invasive species/weeds	0	1	2	3	N/A
	c. Dead vegetation/exposed soil	0	1	2	3	N/A

E. Outlets						
<input type="checkbox"/>	Inspected					
<input type="checkbox"/>	Not Inspected					
	Item					Comments
1.	Outlets provide stable conveyance out of facility	0	1	2	3	N/A
2.	Excessive trash/debris/sediment accumulation at inlet	0	1	2	3	N/A
3.	Evidence of erosion at/around inlet	0	1	2	3	N/A

Open Channel
 Inspection and Maintenance Checklist
 for Long Term Maintenance of Post-Construction BMPs

<i>F. Miscellaneous</i>						
<input type="checkbox"/>	Inspected					
<input type="checkbox"/>	Not Inspected					
	Item					Comments
1.	Complaints from local residents	0	1	2	3	N/A
2.	Mosquito proliferation	0	1	2	3	N/A
3.	Encroachment on facility or easement by buildings or other structures	0	1	2	3	N/A

Inspector's Summary:

Sketch of Facility
 (note problem areas)